

# Service Area Plan

## Department of Health

### *Women, Infants, and Children (WIC) and Community Nutrition Services (43017)*

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## Service Area Background Information

### Service Area Description

This service area administers the U. S. Department of Agriculture's (USDA) Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Program to eligible residents of the Commonwealth. This service area is administered by the VDH Division of WIC and Community Nutrition Services. In addition the service area supports public health community nutrition throughout the Commonwealth. Recently, the service area has assumed the role of facilitator, convener and leader of obesity prevention and control within the Commonwealth as well.

The Virginia WIC Program serves women who are breastfeeding, pregnant or have just given birth; infants less than one (1) year-old and children less than five (5) years-old. WIC participants must be Virginia residents and meet the financial and nutritional requirements set forth by regulations. Financial eligibility is defined as income below 185% of the federal poverty level while nutritional eligibility is defined by risk factors such as a medical problem or an unhealthy diet. Mothers, fathers and legal guardians may apply for WIC benefits for the children in their care.

The purpose of the program is to assure healthy diets during pregnancy and breast-feeding, infancy and early childhood to age five for eligible families who might otherwise not be able to afford to eat properly. The provision of education for mothers and/or primary care-givers about healthy eating is coupled with vouchers to purchase a defined package of high nutrient foods at community groceries. Increasing attention is being paid to educating families about ways to avoid the risks of childhood obesity while assuring proper nutrition. Breastfeeding is promoted while regular and specially prescribed formulas are provided for infants who are not breastfed.

### Service Area Alignment to Mission

This service area directly aligns with the Virginia Department of Health's mission to promote and protect the health of Virginians by providing screening, medical referrals, nutrition education and foods containing nutrients required during critical times of growth and development to women, infants and children. The service area further supports the agency mission through its leadership in the Commonwealth's effort to prevent obesity, provision of education materials relative to community nutrition areas and collaboration with public and private stakeholders in the state's health.

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#### **Service Area Statutory Authority**

- The Special Supplemental Nutrition Program for Women, Infants and children (WIC) was authorized as part of the Child Nutrition Act of 1966, Section 17 [42 U.S.C. 1786] to provide supplemental foods and nutrition education to pregnant, postpartum and breastfeeding women, infants and young children from families with inadequate income. WIC Regulations are published in the Code of Federal Regulations, 7 C.F.R. Part 246 – Special Supplemental Nutrition Program for Women, Infants and Children.
- The WIC Farmers’ Market Nutrition Program was established in July 1992 as Public Law 102-314 to provide resources in the form of fresh, nutritious, unprepared foods (fruits and vegetables) from farmers’ markets to WIC participants and to expand the awareness use of and sales at farmers’ markets. Regulations are published in the Code of Federal Regulations, 7 C.F.R. Part 248.
- Code of Virginia § 32.1-351.2 establishes the Children’s Health Insurance Program Advisory Committee. WIC eligibility is incorporated into the Committee’s work, as the Department of Medical Assistance Services is required to enter into agreements with the Department of Education and VDH to identify children who are eligible for free or reduced school lunches or WIC in order to expedite the eligibility for FAMIS.
- Code of Virginia § 32.1-77 authorizes the development and submission of state plans for maternal and child health and children with special health care needs to the federal government and authorizes the state health commissioner to administer and expend federal Title V funds. The Title V Grant is listed in Title 42 of United States Code §§701-710, subchapter V, chapter 7.

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#### **Service Area Customer Base**

Customer(s)	Served	Potential
Addressing Childhood Overweight Trainees	935	1,500
CHAMPION Participants - Blue Ridge Area	78	534
CHAMPION Participants - Central Area	78	1,230
CHAMPION Participants - Hampton Roads/Tidewater Area	108	1,149
CHAMPION Participants - Healthcare Providers and Payers	102	2,812
CHAMPION Participants - Northern Virginia Area	87	1,241
CHAMPION Participants - Public Assistance	11	65
CHAMPION Participants - Roanoke Area	65	727
CHAMPION Participants - Southwest Virginia	35	355
Dietetic Internship Students	67	75
Farmer Vendors	50	83
Health and Physical Education Teacher Trainees	130	200
Local Health Districts	35	35
School Nurse Trainees	150	150
WIC Authorized Retail Stores	830	900
WIC Farmer's Market Participants - Children	22,432	42,918
WIC Farmer's Market Participants - Women	12,228	18,099
WIC Participants	136,219	213,126
WIC Participants - Children	66,222	125,521
WIC Participants - Infants	35,615	35,415
WIC Participants - Women	35,122	52,190
Women Receiving Folic Acid Supplements	42,000	48,000

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#### **Anticipated Changes In Service Area Customer Base**

- The WIC participant customer base is heavily impacted by state economic conditions that increase or decrease the number of families below the qualifying federal poverty levels
- Due to limited funding of the WIC Program by USDA, it is anticipated that pregnant women will become a prioritized customer base for WIC. Unrestricted service to greater numbers of potential eligibles of all categories is not expected to continue.
- Both WIC and MCH serve a very specific population of women and children. The potential loss of federal Public Health and Health Sciences (PHHS) block grant funds would limit nutrition services to any other groups.
- While Virginia does not have the largest obesity rate in the nation, it does have the fastest growing obesity rate in the nation. This translates into a greater need for obesity prevention and control services.
- The American Dietetic Association's Education Task Force has recommended that all entry level dietitians be required to have a Master's Degree and be a Registered Dietitian (RD) or eligible to take the RD exam, as compared to the current requirement of Bachelor's degree with an RD or be RD eligible. Since VDH is not a degree granting program, our internship will not be accredited.
- Congressional and USDA regulations require the Division to closely monitor and limit the number of specialized retailers who receive more than 50% of their income from WIC.

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#### **Service Area Products and Services**

- WIC Program

WIC provides Federal grants to States for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, to infants less than one year old and children less than five years old who are found to be at nutritional risk. WIC is operated through local health districts in Virginia. WIC provides high-quality nutritional care and food to eligible participants. The program provides milk, cheese, eggs, juice, cereal, dried beans or peas, peanut butter and iron-fortified formula that supply crucial nutrients such as protein, iron, calcium, and vitamins A and C essential to maintain health. In addition to access to healthy foods, WIC also provides nutrition education, healthy recipes, private and group sessions with a nutrition expert, free nutrition checkups, support and help with breastfeeding and referrals to other community services.

- Grant Administration

Federal funds are awarded to each state through a complex formula utilizing food package cost and past program participation. Maximizing the amount awarded to Virginia, as well as assuring the state pays no penalties, requires constant monitoring. Inflation in food costs can reduce the number of clients the grant will support during the year requiring administrative action. Likewise, Local Agency failure to provide services to the anticipated number of clients can cause the state to under-spend their food grant resulting in penalty. In order to reduce overall food costs, and as required by federal regulations, Virginia contracts for a single brand of infant formula. This relationship adds \$25 million to the federal grant but requires significant administrative management, reporting and billing. USDA requires the state to obtain prior approval for many actions, and significant routine reporting as well.

In order to assure maximum utilization of the grant by participants, the service area manages a comprehensive marketing effort throughout the state. To facilitate Local Agency client services as well as collect all needed data, a central automated system is developed and managed for the entire state.

- WIC Nutrition Education

Nutrition education is a core service provided by the WIC Program. Local agencies must make nutrition education available to all participants at no cost. Nutrition education is designed to meet the two basic goals of teaching participants the relationship between proper nutrition and good health, and assisting participants in making positive changes in their food habits. Methods of nutrition education include individual and group counseling as well as web-based and multi-media educational opportunities. These services are also coordinated and integrated with other clinics and services. Virginia WIC local agencies are required to make obesity prevention a major goal for WIC services each year.

- Retail Store Management

The Division of WIC and Community Services recruits, trains, authorizes and monitors more than 800 retail stores which provide food and formula benefits to 140,000 eligible participants. Authorized stores consist of small, independent businesses, military commissaries, and multi-state grocery chain stores. Authorized stores must be competitively selected based upon objective factors such as store location, variety of foods sold and prices charged to the WIC

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Program. Individual store's level of program compliance is monitored using both overt, onsite visits, as well as "covert" undercover compliance investigations. Stores documented to be non-compliant with state and federal WIC Program requirements can face substantial financial penalties, e.g., up to \$40,000 fine.

- Local Agency Management Oversight

The Division of WIC and Community Services is responsible for the development, implementation, and management of an ongoing monitoring and evaluation system of local health departments and has developed the Local Agency Management Evaluations (LAME) automated process for this service. The LAME process provides a mechanism to monitor local agency operations, review financial and participation reports and require corrective action plans to resolve deficiencies as needed. Operations subject to evaluation include, but are not limited to, management, referrals, outreach, participation, eligibility, certification, time and effort reporting, civil rights compliance, accountability, financial management systems and food delivery systems. On-site evaluations of local agencies are performed every two years; the local agency performs a self-evaluation during the years in which an on-site evaluation is not conducted.

The Division also works in conjunction with the USDA to complete State Technical Assistance Reviews (STAR). STAR reviews are conducted by the USDA and assist the Division in performing quality assurance tests. STAR reviews routinely consist of:

- Caseload and Food Funds Management;
- Certification and Eligibility;
- Civil Rights;
- Farmers Market Nutrition Program (FMNP);
- Food Delivery Systems & Food Instrument Accountability; and
- Post Implementation and Monitoring - Audit.

The State WIC Office enters into a Memorandum of Agreement (MOA) with each local agency upon receipt and approval of that local agency's WIC Services Plan (WSP). The WSP is another method by which the State WIC Office helps to ensure that the local agencies are in-line with both State and Federal goals.

- Statistical Analysis/Data Management

This service area provides data-related support for all WIC products and services, delivers participation and financial data to USDA and disseminates various WIC Program reports to the central office and local WIC agencies. Tabular reports, charts and maps are needed for the central office on an on-going basis to support outreach efforts, local agency and retailer monitoring and local agency performance measuring. WIC program data is collected and analyzed using a variety of established research methods, procedures, statistical formulas and techniques. Trends are identified and projections are developed for financial and participation data in order to report program expenditures and participation projections to USDA.

- Training Program

This service area provides a variety of both mandatory and voluntary training opportunities to Virginia WIC employees including:

- 1.ACO (Addressing Childhood Overweight Training) – was provided to local health

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departments throughout the Commonwealth on “Addressing Childhood Overweight in Our Communities”. The purpose of the training was to allow local WIC staff the opportunity to join together with others from within the community in order to create an environment for fighting childhood overweight. The training discussed resources that are available to healthcare professionals and the clients they serve; techniques in discussion and confronting the issue with parents and caretakers, identifying roles that they play in battling childhood overweight.

2.WIC Nutrition 101 – an introductory course regarding the purpose and goals of the WIC Program

3.Civil Rights Training – to train WIC Program staff with all applicable Civil Rights requirements and provide an understanding of pertinent, proper procedures

4.Special Formula Training – to familiarize all Virginia WIC staff, at the state and local agency level on the proper procedures for ordering special formula from the Community Action Program (CAP) Distribution Center

5.Racial/Ethnic Data Collection Training – to inform the user of the purpose for collecting racial and ethnic information of enrolled WIC participants, as well as the proper procedures for doing so

- WIC Farmers’ Market Nutrition Program

The Farmers’ Market Nutrition Program (FMNP) is a separate grant sponsored by USDA. It provides locally grown fresh fruits and vegetables and fresh cut herbs to WIC participants. Virginia’s FMNP is a pilot program currently operating in seven localities: Arlington, Chesapeake, Fairfax, Hampton, Norfolk, Peninsula and Virginia Beach. The focus of the FMNP is to provide a combination of nutrition education, locally grown fresh fruits and vegetables and health care oversight to eligible women and children while simultaneously increasing the awareness, use of and sales at farmers’ markets. Participants receive four \$5.00 food instruments that can be redeemed for fresh fruits, vegetables and fresh cut herbs from locally certified farmer vendors at designated Farmer Market sales locations.

In collaboration with the Department of Agriculture and Consumer Services, approximately 50 farmer vendors are recruited, trained and authorized to accept WIC food instruments for eligible participants to purchase locally grown fresh fruits and vegetables. The Farmers Market Program runs from July 1 to October 31st, yearly.

- Community Nutrition Services

- Obesity Prevention and Control

This service area has placed greater and greater emphasis on obesity prevention and control over the last ten years. Virginia was one of five states to receive funding for the FitWIC grants to address obesity in the WIC population. Grant applications for the CDC Nutrition and Physical Activity grant have been submitted and approved but not funded. In the past the Division has functioned in the area of interventions, however, is now moving into a leadership role to coordinate obesity prevention and control efforts across the state and make Virginia agencies more competitive for grants in this area.

- 5 A Day for Better Health Program

Eating fruits and vegetables can reduce the risk of many chronic diseases such as heart disease and cancer as well as play a significant role in reducing obesity. DWNS offers the 5 A Day for Better Health Program, a public awareness campaign that encourages Virginians to eat 5 or

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more servings of fruits and vegetables every day for better health. Technical assistance and 5 A Day materials are provided to local programs.

- **CHAMPION**

CHAMPION (Commonwealth's Healthy Approach and Mobilization Plan for Inactivity, Obesity and Nutrition) is a process for developing a state wide plan that addresses prevention and control of obesity in Virginia. This program was created in response to an increase in the number of adults, adolescents and children who are overweight or obese in Virginia. The goals of the program include developing an aggressive coordinated strategic plan that addresses obesity in Virginia and compiling a state wide electronic resource guide to include a directory on successful community and state programs and locality-specific data relative to obesity. CHAMPION is working with stakeholders throughout the Commonwealth to improve nutrition and physical fitness health for all Virginians.

- **"Eat Smart Virginia" Program**

In response to the USDA call for faith-based initiatives, the service area has developed and will implement nutrition program targeted to faith-based communities in Virginia. "Eat Smart Virginia" will provide nutrition and physical activity materials to support healthy eating and physical activity.

- **Employee Wellness Program**

The Division of WIC and Community Nutrition Services (DWCNS) developed an Employee Wellness Program, "Step 'n' Up for a Healthier Virginia", for Virginia Department of Health (VDH) employees. DWCNS tested the prototype in the Virginia Department of Health's Madison building. The program promoted stair climbing as a means of increasing physical activity during an employee's workday. The program information will be prepared to be available to all State agencies. The program materials will be available on the web inclusive of the site administrator guide book, graphics, and posters.

- **Folic Acid Campaign**

The Virginia Statewide Folic Acid Campaign conducted by the Virginia Council on Folic Acid, initiated in 1999 by the Virginia Department of Health and the March of Dimes, Virginia Chapter has an ongoing educational program to maintain awareness about the importance of the daily intake of folic acid. Beginning in July 2005, the Folic Acid Supplement Disbursement Program will be implemented, a program in which folic acid supplements will be provided to nineteen health districts. The program expects to serve over 42,000 women receiving Family Planning services.

- **Breastfeeding Promotion**

This service area promotes breastfeeding as the preferred infant feeding method by creating a positive health care setting environment, providing information on the health benefits of breastfeeding and supporting breastfeeding women. The goals of this program are to improve infant and family health by making breastfeeding the cultural norm and to increase the rates of breastfeeding initiation and duration among the general public and WIC participants. In addition, breastfeeding has been shown to have an effect of preventing obesity for children who are breastfed. Goals are accomplished through efforts such as the Electric Breast Pump Loan Program and the Statewide Breastfeeding Advisory Committee of Virginia. The WIC Breastfeeding Peer Counselor Program also supports breastfeeding by providing counseling



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from peers to WIC participants. This project receives special funding from USDA through a separate grant.

- **School Nutrition Program**

Staff within this service area collaborate with other divisions within the Office of Family Health Services and the Department of Education to provide training to school nurses and health and physical education teachers across the state. This same group has collaborated to develop web based curriculum materials for teachers to use to integrate nutrition and physical activity into a variety of classes.

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#### **Factors Impacting Service Area Products and Services**

- Changing demographics of the WIC customer base due to an increasing Hispanic and Asian populations require that services including outreach and translation be increased in order to maximize participation in DWCNS programs.
- Virginia's participation in the CROSSROADS consortium for development of a common WIC computer system in four states will require that business processes be examined, revised and/or re-engineered. This could have significant impact on the operation of the Virginia WIC Program at the state and local levels.
- CDC's failure to fund Virginia for either the STEPS grant or the Nutrition and Physical Activity grant severely hampers the division's ability to combat obesity.
- Limited funding resources will direct the population groups which can be served.
- Availability of grant funds and the focus of those funds will determine the future direction of Community Nutrition Services.
- New contracts for banking services, covert compliance operations and infant formula rebate will impact the future of WIC services.

#### **Anticipated Changes To Service Area Products and Services**

- Due to insufficient funding, current efforts to address obesity prevention across the lifespan will have to be reduced to focus strictly on childbearing women and children up to 18 as covered by WIC and MCH. Obesity prevention activities will not be targeted to males over 18, older women, or seniors.
- Reduced funding may require that all Community Nutrition Services be limited to obesity prevention efforts.
- Breastfeeding Peer Counselor programs will have to be funded from base WIC funding in the future. This may cause a change in the design of the breastfeeding program overall.
- The WIC Farmer's Market Nutrition Program will continue to be limited to pilot sites unless additional state and federal funds become available.
- The CHAMPION process for community level prioritization of issues and solutions will become a new service offered to public health professionals across the country. This is an innovative and original method of developing statewide plans that is already receiving recognition.
- The newly created Statewide Breastfeeding Advisory Committee will provide value leadership for breastfeeding promotion activities in the Commonwealth. This service area will support the group financially and with staff resources.
- The WIC Program has consistently rewarded local agencies who outperform their projected participation goals with financial incentives. The Virginia WIC Program is actively pursuing the converse action, wherein monies provided to local agencies in anticipation of achieving projected participation levels will be recouped by the State WIC Office for underperformance.

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#### Service Area Financial Summary

The primary source of funding for DWCNS is provided by federal grants from the United States Department of Agriculture. The Division works closely with the USDA throughout the year, providing the agency with monthly financial reports, mid-year and year-end reports. The WIC Farmer's Market Nutrition Program requires a state fund match of at least 30% of administrative costs. Relatively small amounts of Maternal and Child Health (MCH) and Public Health and Health Services (PHHS) block grant funds are used in conjunction with leverage of WIC funds to provide broad base nutrition services to citizens of the Commonwealth.

Anticipated changes to the service area budget include a projected loss of WIC funds of \$12 million a year resulting from a new contract for infant formula rebate, effective July 2006. In addition, it is anticipated that PHHS funds will be eliminated completely. Neither state nor federal funds are available for expansion of the WIC Farmer's Market Nutrition Program. WIC Nutrition Education funds cannot be leveraged as they are now without MCH, PHHS or general fund budgets.

	<u>Fiscal Year 2007</u>		<u>Fiscal Year 2008</u>	
	General Fund	Nongeneral Fund	General Fund	Nongeneral Fund
<b>Base Budget</b>	\$262,297	\$65,312,701	\$262,297	\$65,312,701
<b>Changes To Base</b>	\$0	\$527,668	\$0	\$527,668
<b>SERVICE AREA TOTAL</b>	<b>\$262,297</b>	<b>\$65,840,369</b>	<b>\$262,297</b>	<b>\$65,840,369</b>

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## Service Area Objectives, Measures, and Strategies

### Objective 43017.01

#### ***Ensure cost effective administration and management of the WIC program.***

In order to remain fiscally responsible and ensure that the benefits of the WIC Program are reaching as many participants as possible, the service area will focus on optimizing the use of federal funding. This two tiered objective involves monitoring and evaluating food prices and reimbursement levels paid to stores in order to ensure cost effectiveness. A component of this objective involves systematic controls being developed and implemented to monitor food cost paid to all authorized stores with a focus on high risk stores (that is stores whose have 50% or more of their income generated by the WIC Program) in contrast to comparable non high risk stores. The implementation of such a system will enable the Division of WIC and Community Services to determine if certain stores are being reimbursed at a market-competitive rate for frequently redeemed foods/formulas.

A vital dimension of this objective means the Division will also direct resources towards identifying a strategy to further reduce food package costs associated with the selection of WIC approved foods. Implementing more effective screening controls will position the service area to further reduce its food costs. Any modifications to the cost of the Virginia WIC food package would be contingent upon data collection and analysis of the financial and nutritional impact of these changes.

Increasing the number of pregnant women who are certified for participation in WIC is the second part of this objective, which also ensures that federal funding is being utilized to the fullest extent. By promoting the WIC program and the WIC informational telephone line, awareness of the program will increase, as will the number of certified participants.

#### **This Objective Supports the Following Agency Goals:**

- Promote systems, policies and practices that facilitate improved health for all Virginians.
  - ( This objective also aligns with the following Virginia's long-term objectives:
    - Be recognized as the best managed state in the nation
    - Inspire and support Virginians towards healthy lives and strong and resilient families)

#### **This Objective Has The Following Measure(s):**

##### ● **Measure 43017.01.01**

##### ***Effective, systematic controls to monitor food package costs***

**Measure Type:** Input

**Measure Frequency:** Annually

**Measure Baseline:** New measure; development of controls will begin in 2006.

**Measure Target:** To be completed by July 2007.

##### **Measure Source and Calculation:**

A systematic approach to data collection and analysis of food package data and comparable food costs will be developed.

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- **Measure 43017.01.02**

***Food package cost***

**Measure Type:** Outcome      **Measure Frequency:** Annually

**Measure Baseline:** New measure; baseline data not available. The baseline will reflect the cost of the Virginia WIC food package as of July 1, 2006. This baseline will also occur in conjunction with development of the cost reduction strategy.

**Measure Target:** Five percent reduction in costs below the baseline by July 1, 2007.

**Measure Source and Calculation:**

A cost reduction strategy will be developed and agreed upon by DWCNS and the USDA. Reduction will be calculated through measurements contingent upon the strategy.

- **Measure 43017.01.03**

***Number of newly certified pregnant women enrolled in WIC***

**Measure Type:** Output      **Measure Frequency:** Quarterly

**Measure Baseline:** Since FY04, the average number of pregnant women becoming certified per month is 1,915.

**Measure Target:** Increase the monthly average to 2,106 (10% increase) by July 1, 2007.

**Measure Source and Calculation:**

Quarterly reports on the number of newly certified pregnant women are generated through WICNet.

**Objective 43017.01 Has the Following Strategies:**

- DWCNS will increase marketing efforts directed towards target population regarding the WIC program and the WIC informational telephone line
- DWCNS will perform research and analysis on the average food price versus reimbursement rates to determine proper compensation rates
- DWCNS will identify a strategy to reduce costs; different strategies, such as rebate programs and brand restrictions, will be investigated

**Objective 43017.02**

***Advance the community based response to obesity.***

Over the last decade, Virginia has seen an alarming increase in the number of adults, adolescents, and children who are obese or overweight. According to the CDC, fifty-eight percent of Virginia's adults are overweight or obese. This trend is also true for Virginia's children and adolescents. In addition, national research indicates that Virginia's health care costs are rapidly rising due to obesity rates; Virginia has the 14th highest health care costs in comparison to the fifty states. The Division of WIC and Community Nutrition Services adopted a community-based process for developing a state wide plan addressing prevention and control of obesity in Virginia. In order to assure the participation of stakeholders throughout Virginia, the Division of WIC and Community Services has conducted six regional meetings in Southwest, Roanoke, Blue Ridge, Central, Northern Virginia & Hampton Roads for the Commonwealth's Healthy Approach and Mobilization Plan for Inactivity, Obesity and Nutrition (CHAMPION). A CHAMPION meeting was also held for healthcare providers and payers. The goal of these meetings was to establish recommendations and solutions for addressing obesity on a community level. DWCNS hosted a similar meetings focusing on minorities.

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In addition to the efforts of CHAMPION, the Division is also in the process of requesting and collecting program profiles of community programs that are currently in place which address obesity. The Division plans on evaluating these plans and, in order to equip communities with resources to reduce obesity, develop a best practices guide from which communities can replicate successful programs.

#### **This Objective Supports the Following Agency Goals:**

- Prevent and control the transmission of communicable diseases.  
( )
- Collaborate with partners in the health care and human services system to assure access to quality health care and human services.  
( )
- Promote systems, policies and practices that facilitate improved health for all Virginians.  
( This objective also aligns with the following Virginia's Long Term Objective:
  - Inspire and support Virginians towards healthy lives and strong and resilient families)

#### **This Objective Has The Following Measure(s):**

##### ● **Measure 43017.02.01**

***Number of community interventions that are fully evaluated and deemed best practices and models for replication***

**Measure Type:** Output

**Measure Frequency:** Annually

**Measure Baseline:** 0 in FY05.

**Measure Target:** One program will be evaluated and posted on the DWCNS webpage by the end of FY07.

**Measure Source and Calculation:**

A webpage that is part of the DWCNS website designed to share information regarding obesity in Virginia will list completed evaluations.

##### ● **Measure 43017.02.02**

***Number of community-based solutions that are identified and researched***

**Measure Type:** Outcome

**Measure Frequency:** Annually

**Measure Baseline:** Six regional and two statewide meetings were held in which solutions to obesity created on a community level were discussed and prioritized during 2005.

**Measure Target:** Two prioritized solutions will be comprehensively researched and made available to interested stakeholders by January 2007.

**Measure Source and Calculation:**

Two completed papers detailing the researched solutions.

#### **Objective 43017.02 Has the Following Strategies:**

- DWCNS will encourage communities to formally submit their community obesity intervention for review.
- DWCNS will perform preliminary reviews on the interventions submitted, and determine which plan is appropriate for a full evaluation.

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- DWCNS will complete an evaluation of the community intervention with the greatest potential to be selected as a best practice. The evaluation will include a full overview of the intervention that will detail who is served, the cost/benefit analysis, the resources needed, and the timeframe.
- DWCNS will assess the intervention for feasibility, to determine how it can be implemented in other communities in Virginia, i.e. what obstacles may arise, etc.
- Once a program has completed the evaluation process, the information gathered will be posted on the DWCNS website.
- DWCNS will identify two community-based solutions that resulted from the statewide and regional meetings for further research.
- DWCNS will research all components of the selected solutions including feasibility, results of similarly implemented solutions, cost benefit, etc.

#### **Objective 43017.03**

##### ***Increase the number of women who initiate breastfeeding.***

The service area promotes breastfeeding as the preferred infant feeding method. The Division works to improve infant and family health by making breastfeeding the cultural norm, and makes efforts to improve the rates of breastfeeding initiation and duration in Virginia's WIC program to meet the National Healthy People 2010 Breastfeeding Objective of: 75% of women breastfeeding at hospital discharge, 50% breastfeeding their infants at 6 months and 25% breastfeeding their infants at 1 year of age.

In order to achieve the Healthy People 2010 objective for all Virginians, the Division of WIC and Community Services will bring together representatives of state and national organizations who are “experts” in pediatrics, health care and nutrition through the formation of a statewide Breast Feeding Advisory Council.

The creation of a data tracking system for breast feeding data has also been identified as a priority, as no such mechanism currently exists. With current data, solutions can be more effectively recommended and populations more efficiently targeted.

#### **This Objective Supports the Following Agency Goals:**

- Collaborate with partners in the health care and human services system to assure access to quality health care and human services.
  - ( This objective meets the following Virginia’s long-term objectives:
    - Inspire and support Virginians towards healthy lives and strong and resilient families)
- Promote systems, policies and practices that facilitate improved health for all Virginians.
  - ( )
- Collect, maintain and disseminate accurate, timely, and understandable public health information.
  - ( )

#### **This Objective Has The Following Measure(s):**

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- **Measure 43017.03.01**

***Creation and implementation of a tracking system to collect breastfeeding data***

**Measure Type:** Output

**Measure Frequency:** Annually

**Measure Baseline:** Currently, the sole source of breastfeeding data is a formula company.

**Measure Target:** Tracking system established by June 2008.

**Measure Source and Calculation:**

The creation of a tracking system will be measured when it is in place and operational, anticipated June 2008.

**Objective 43017.03 Has the Following Strategies:**

- DWCNS will select approximately 20-25 prospective organizations to be a part of the Advisory Committee and make contact with them, setting up individual meetings to discuss the format of the committee and responsibilities of membership.
- DWCNS will organize the logistics of the Advisory Committee meetings including location, time, agenda, etc.
- DWCNS will provide the Advisory Committee with research and data regarding the link between obesity and breast feeding.
- DWCNS will facilitate the creation of a data tracking system by performing research on mechanisms currently in place that collect data related to child birth and breast feeding initiation, as well as research on tracking systems used by other states, and on the national level.
- DWCNS will work with information and technology personnel to implement a data tracking system.